

# Introduction to the Division of Developmental Disabilities and Residential Services



DSHS Division of Developmental Disabilities  
10/20/2005



## What this presentation will cover:

- Defining developmental disabilities (DD).
- Brief overview of the Department of Social and Health Services-Division of Developmental Disabilities (DSHS-DDD).
- Types of residential services provided by DDD.



# The federal definition of developmental disabilities (DD) is:

Physical or mental impairments that begin before age 22, and alter or substantially inhibit a person's capacity to do at least three of the following:

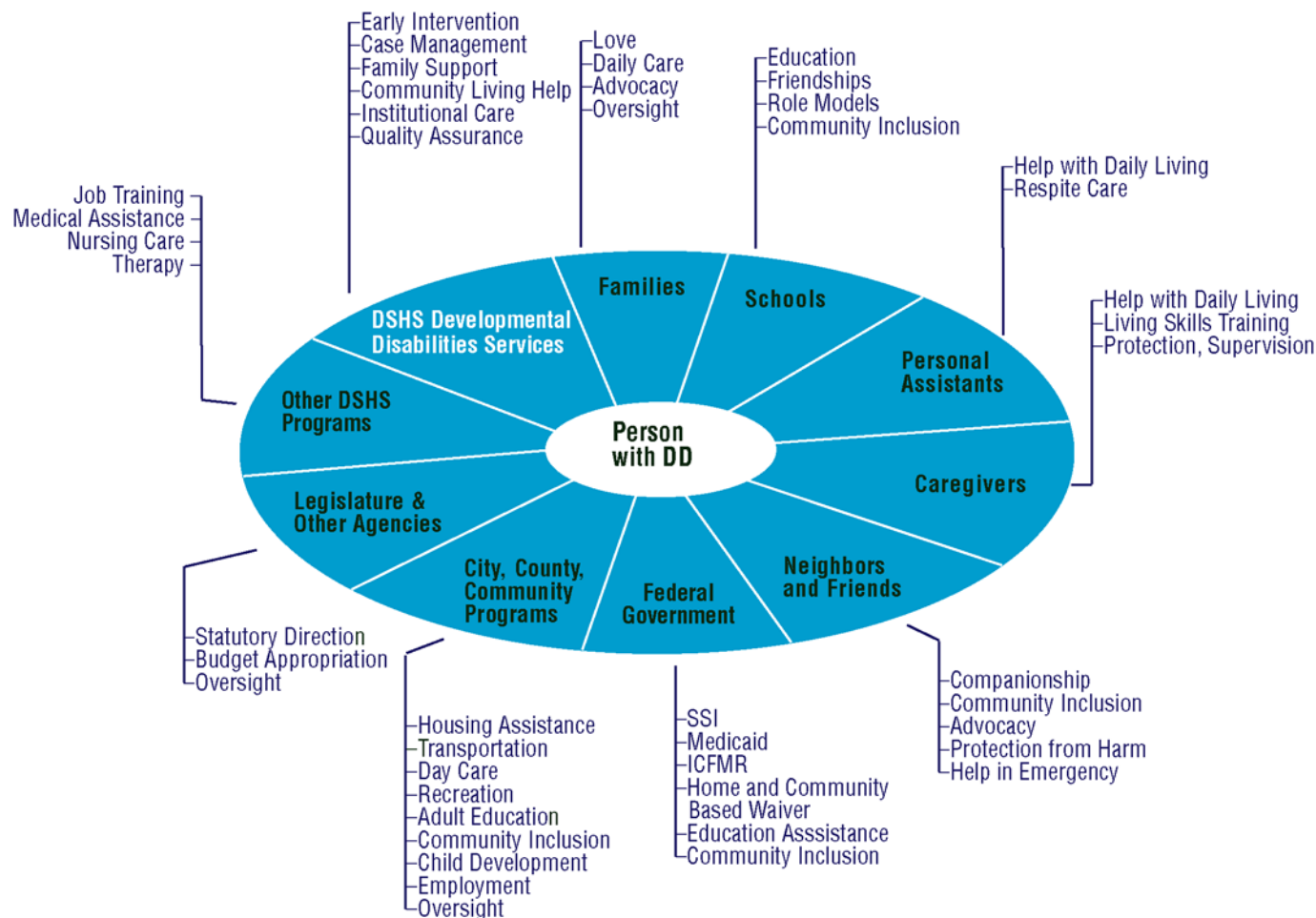
1. Take care of themselves (dress, bathe, eat, and other daily tasks)
2. Speak and be understood clearly
3. Learn
4. Walk/move around
5. Make decisions
6. Live on their own
7. Earn and manage an income



# Washington state's definition of developmental disabilities is more restrictive.

- An individual who has certain conditions that start before age 18 is considered to have DD. Those conditions are defined as:
  - Mental Retardation
  - Developmental Delay (ages birth to 9)
  - Cerebral Palsy
  - Epilepsy
  - Autism
  - Or another neurological or other condition found by the DSHS Secretary to be closely related to mental retardation or to require treatment similar to that required for individuals with mental retardation.
- Neither financial nor service needs are considered when making this determination.

# Services provided through DDD are part of a larger system of supports for people with developmental disabilities.





DDD, in cooperation with community partners, provides an array of services to eligible clients:

- Case Management
- Early Childhood Intervention
- Respite Care
- Personal Care
- Employment and Day Services
- Professional Services (health services and therapies)
- Community Residential Services
- Residential Habilitation Center (RHC) Services



# Eligibility for DDD services is a three-step process:

1. Be determined to have a developmental disability;
2. Be assessed as needing services;
3. Meet other eligibility requirements and/or financial eligibility (for Medicaid programs).

Note: Being determined eligible for DDD services does not necessarily create an entitlement for DDD services.



# Most direct services are delivered in the community by contracted providers.

## **DDD Staff**

- Determine eligibility at six regional offices throughout the state.
- Provide case management, coordinate planning and development of resources, and monitor services.
- Operate two residential programs:
  - Residential Habilitation Centers (RHC)
  - State Operated Alternative Living facilities (SOLA).

## **Contracted Service Providers**

- Include counties, non-profit and for-profit agencies, and individuals.
- Provide the majority of residential services and personal care.
- Provide most non-residential programming, such as employment, etc.

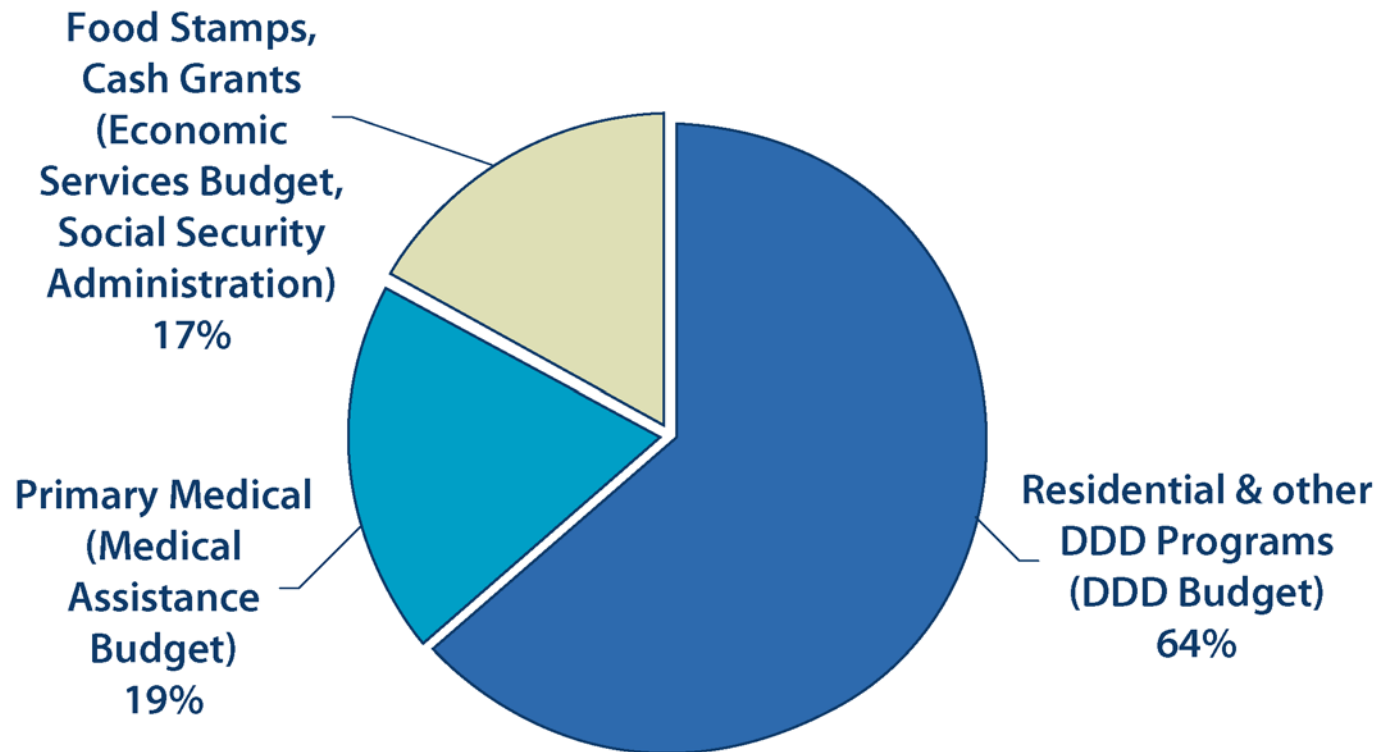




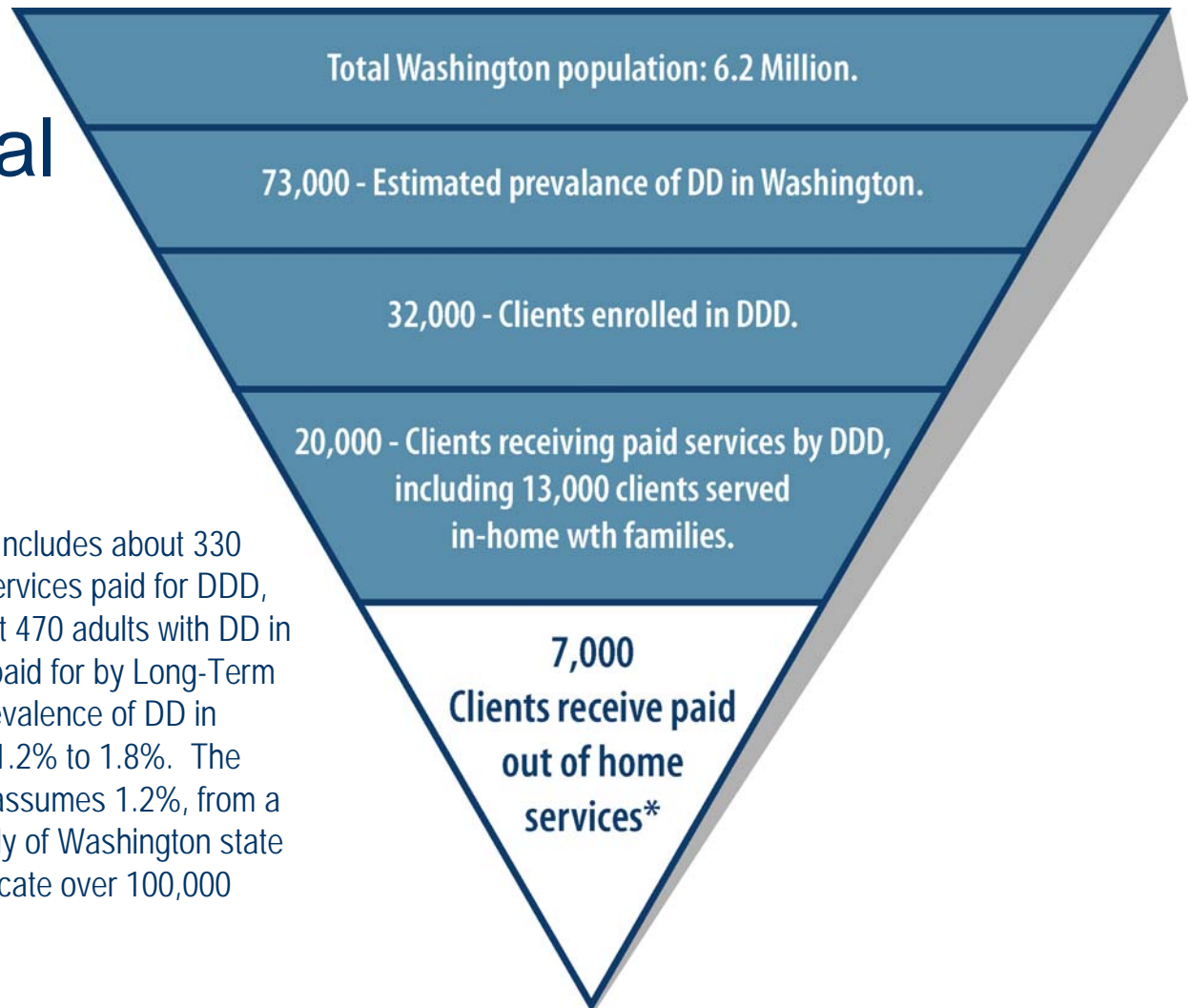
# DDD Budget Snapshot for 2005-07:

- Biennial Operating Budget
  - \$1.4 billion Total Funds, \$770 million General Fund-State
  - 9.7% of all DSHS General Fund-State expenditures
  - 3,320 FTEs
- Biennial Capital Budget
  - \$8.8 million in state funds and bonds for capital improvements to state institutions (Residential Habilitation Centers, or RHCs)

One-third of public benefits going to DDD clients are provided by other parts of DSHS or by the Federal Social Security Administration.

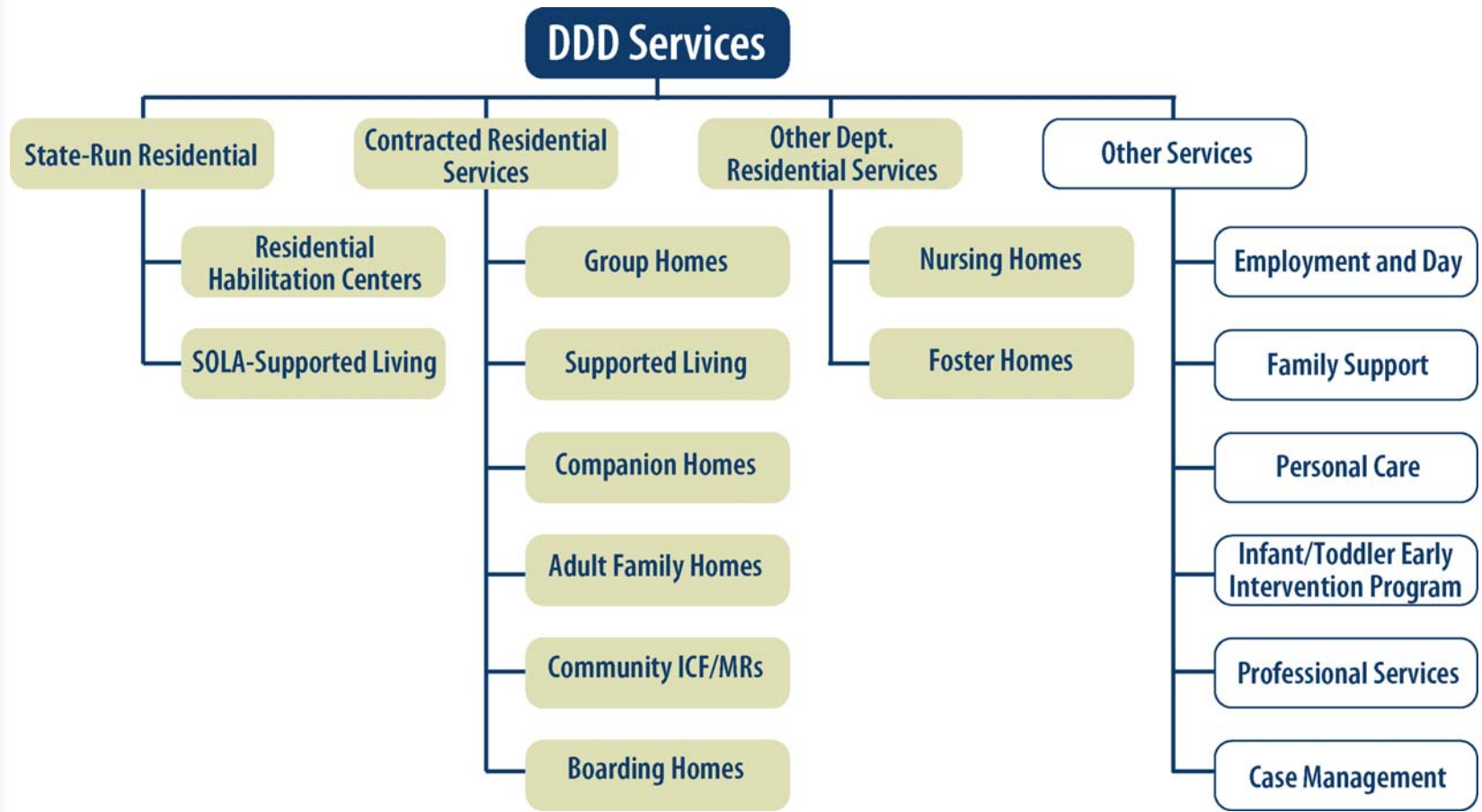


# Only a subset of people with developmental disabilities receive paid residential services.



\*All figures are rounded. Includes about 330 children with residential services paid for DDD, but does not include about 470 adults with DD in nursing facilities that are paid for by Long-Term Care. Also, estimated prevalence of DD in Washington ranges from 1.2% to 1.8%. The prevalence figure shown assumes 1.2%, from a Milliman and Roberts study of Washington state in 2000. 1.8 % would indicate over 100,000 individuals with DD.

# The focus of this study is on the residential portion of DDD's services.



# DDD Residential Services



How do they differ, and who do they serve?



# Defining DDD Residential Services

- For purposes of this presentation, “residential services” refers to paid, out-of-home services, funded by DDD.
- Not included in “residential services” are people with DD who reside with their parents or with other members of their extended family.
  - Of clients living with families, about 11,000 clients (including children) receive Medicaid Personal Care to support activities of daily living.
- Some DDD clients may reside in non-DDD funded facilities such as nursing homes.



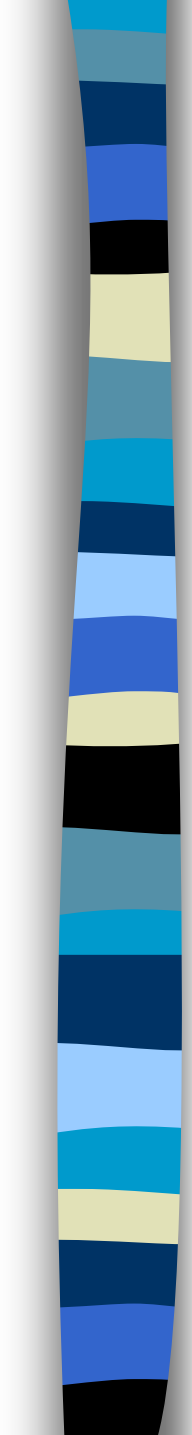
# DDD residential services are provided in either “institutional” or “community-based” settings.

## ■ Institutional Care:

- Residential Habilitation Centers (RHCs)
- Nursing Homes

## ■ Community-Based Care:

- Supported Living/Alternative Living (Includes SOLAs)
- Adult Family Homes (AFHs)
- Group Homes
- Adult Residential Care facilities (ARCs)
- Community Intermediate Care Facilities for the Mentally Retarded (Community ICF/MRs)
- Companion Homes
- Foster Homes (*Children only*)



A number of factors differ among residential settings regardless of whether they are community-based or institutional:

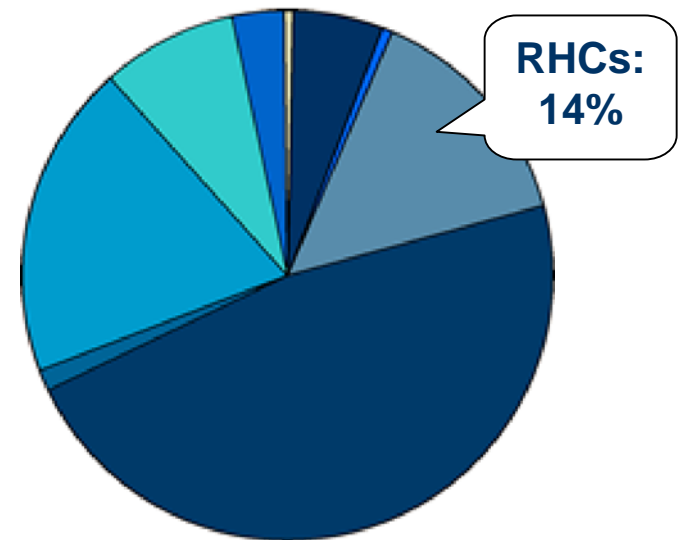
1. Size of facility/number of clients.
2. Mix of clients.
3. Level of supervision.
4. Level of nursing/medical care available on site.
5. Level and type of programming.
6. Public facility or contracted with private vendor.



# Institutional Residential Services: RHCs

- RHCs offer state-operated institutional care for people with DD.
- Provide 24/7 supervision with specialized programming.
- Certified as a skilled nursing facility, as an Intermediate Care Facility for the Mentally Retarded (ICF/MR), or as both.
- Clients must meet Medicaid eligibility and be in need of the active treatment services provided in these facilities.
- Provide some time-limited respite care and professional services to community-based clients.
- RHCs vary in size from 50 to 400.

**Distribution of Adult  
Residential Placements**



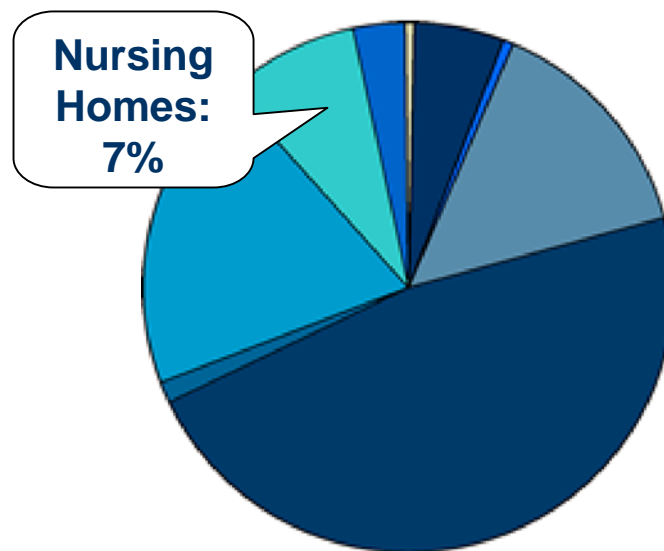
**5 Locations  
1,033 Clients**

**(764 in ICF/MR,  
269 in skilled nursing beds)**

# Institutional Residential Services: Nursing Homes

- Provide 24/7 supervised nursing care, personal care, and therapy for clients with and without DD.
- Client need is often complex, with need for continuous nursing.
- 265 licensed nursing facilities statewide, including hospitals with long-term care wings (all serve majority non-DDD clients).
- Services are paid by Long-Term Care, not DDD.

**Distribution of Adult Residential Placements**

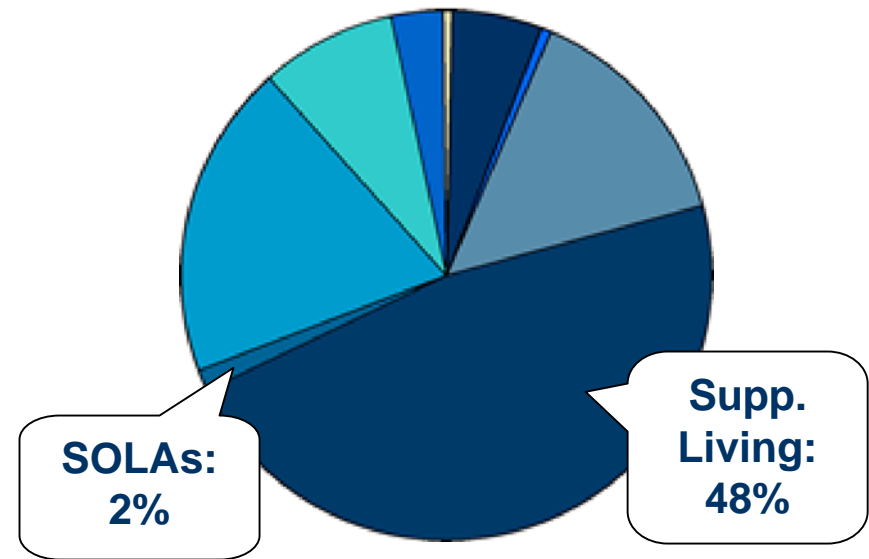


**Multiple Locations  
472 Clients**

# Community-Based Residential Services: Supported Living, including SOLAs

- Certified, in-home care provided to people with developmental disabilities who live alone or together as roommates and share living expenses.
- Provides instruction and support to people in their own homes. Supports vary from a few hours per month to 24/7 support.
- Clients using State Operated Living Alternatives (SOLAs) have their support provided by state employees, others are supported by contracted providers.
- Provided in settings of 1-4 clients.

**Distribution of Adult Residential Placements**

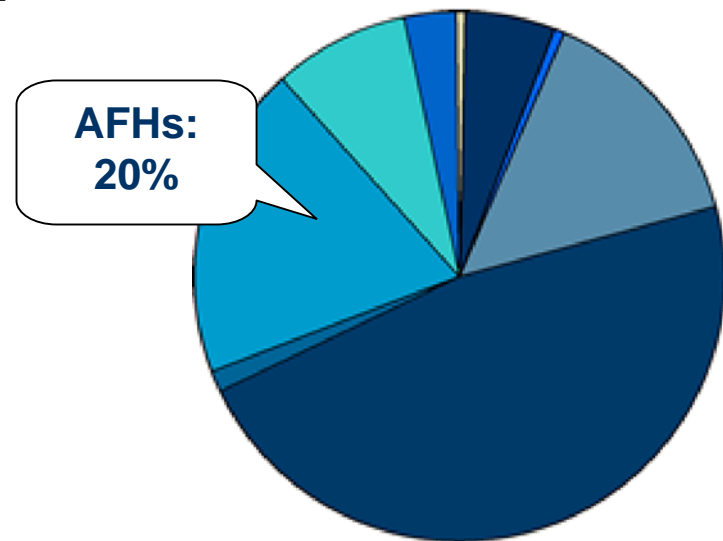


**3,411 clients with private providers**  
**113 clients with SOLAs**

# Community-Based Residential Services: Adult Family Homes (AFHs)

- Licensed, privately operated facilities, serving people with DD and people with other long-term care needs.
- 24/7 supervision and personal care support.
- Client needs vary and can include clients with more complex needs.
- Some homes provide specialized care for persons with developmental disabilities, dementia, or mental health issues.
- Settings of 1-6 clients.

**Distribution of Adult Residential Placements**

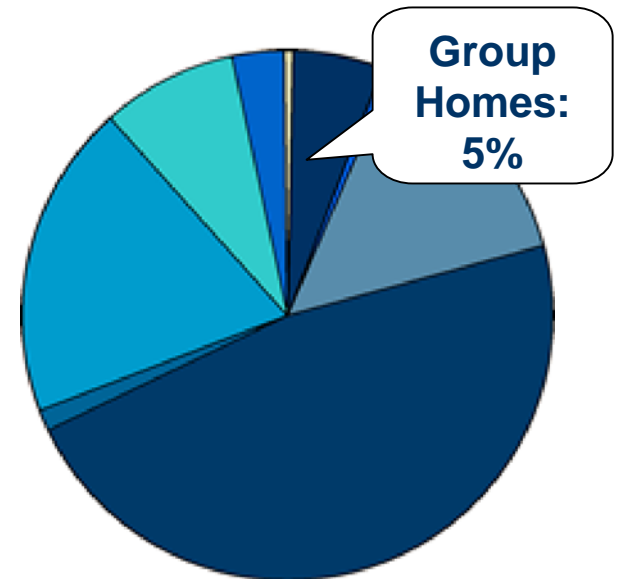


**501 Locations  
1,395 Clients**

# Community-Based Residential Services: Group Homes

- Licensed, privately operated facilities, serving people with DD & people with other long-term care needs.
- 24/7 supervision, training, & personal care support.
- Client needs vary and can include clients with more complex needs.
- Settings serve 4-20 each, average size is about 8 clients.

**Distribution of Adult  
Residential Placements**

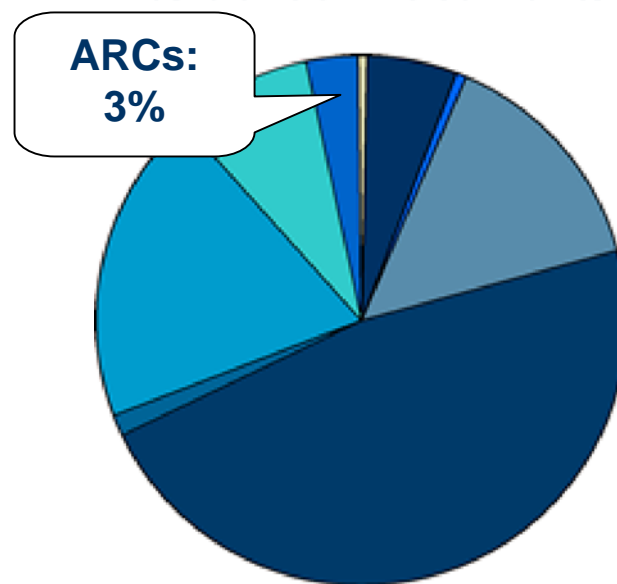


**52 Locations  
392 Clients**

# Community-Based Residential Services: Adult Residential Care (ARCs) or Boarding Homes

- Licensed, privately operated facilities, serving people with DD and people with other long-term care needs.
- Residents range from those requiring very light care such as help with housekeeping to heavier care requiring intermittent nursing services.
- Minimum size serves 7 clients. Currently serve from 12 clients to over a hundred.

**Distribution of Adult Residential Placements**

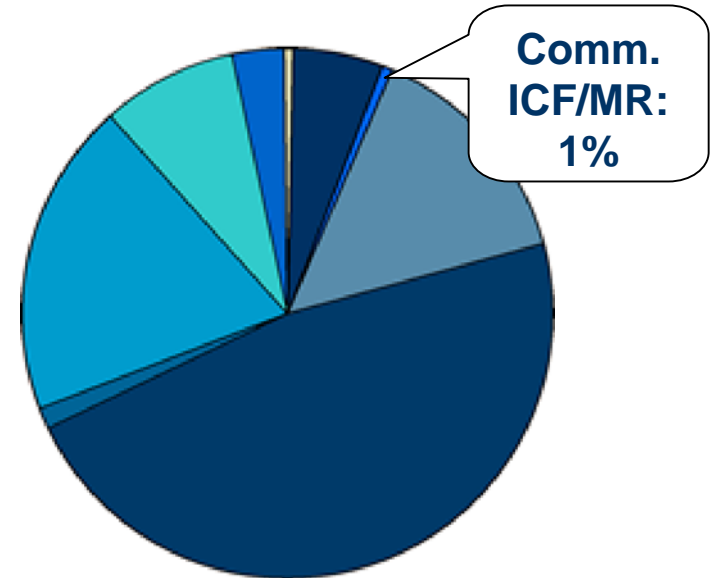


**65 Locations  
241 Clients**

# Community-Based Residential Services: Community ICF/MRs

- Provide 24/7 supervision, habilitation training, and specialized medical/nursing care to persons with DD.
- Clients must meet Medicaid eligibility and be in need of the active treatment services provided in these facilities.
- Average size is 7 clients.

**Distribution of Adult Residential Placements**

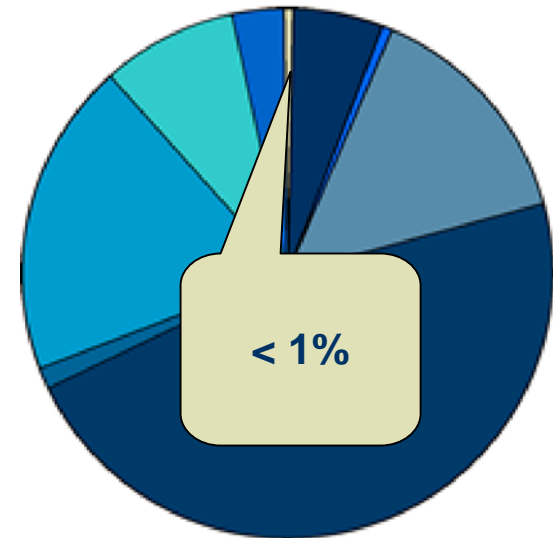


**8 Locations  
58 Clients**

# Community-Based Residential Services: Companion Homes

- Provide residential services and supports in an adult foster care model to clients with DD.
- Offered in a regular family residence approved by DDD to assure client health, safety and well-being.
- Supervision is available 24/7. Client needs vary.
- Limited to one client per home.

**Distribution of Adult Residential Placements**



**24 Clients**

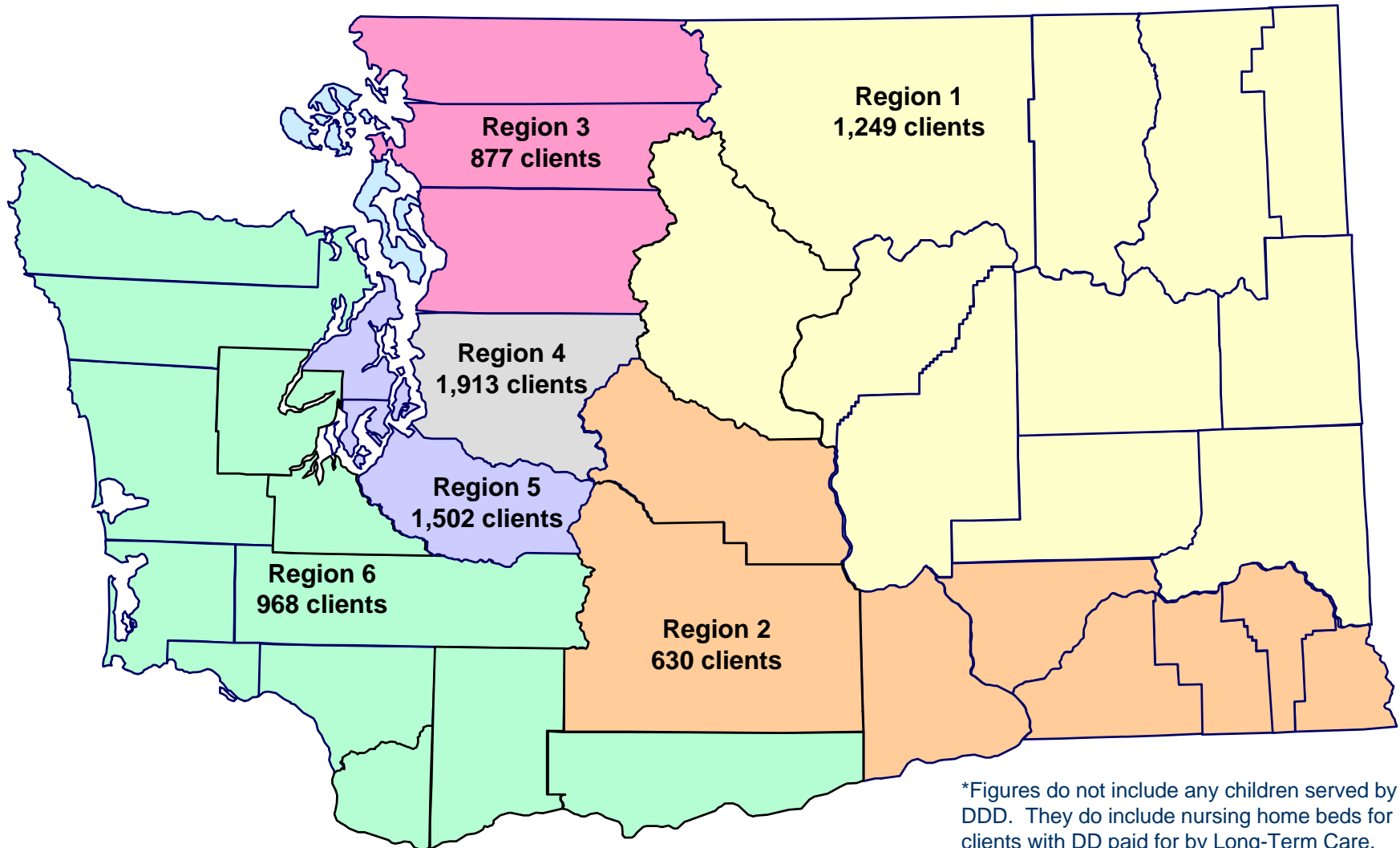




# Community-Based Residential Services: Foster Care (*Children Only*)

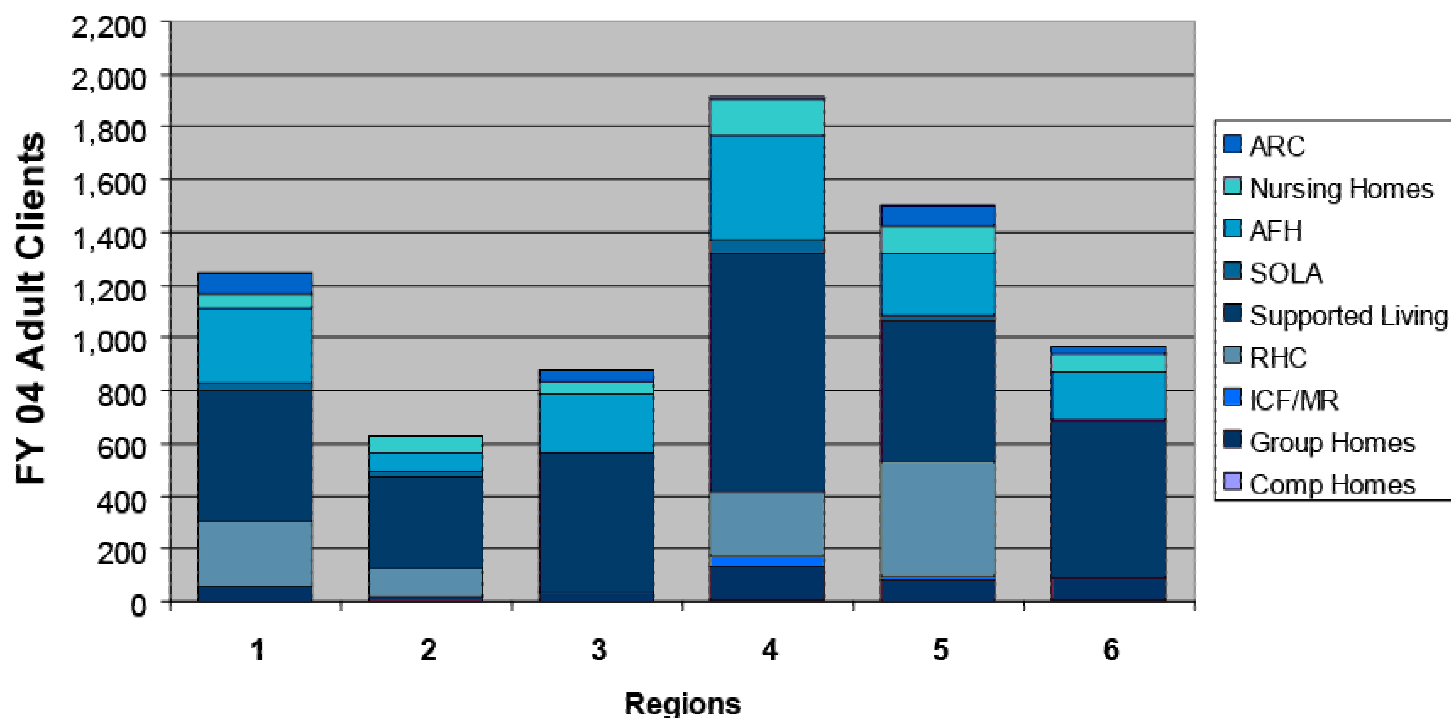
- Foster family services are long-term placements requested by families with children with DD.
- Most services are provided by licensed, individual foster families in their homes, although some are provided by the state in contracted group homes.
- 307 children were served by DDD foster care in FY 2004.
- Other children with DD may be served by the DSHS-Children's Administration if state custody was initiated due to abuse/neglect rather than due to a crisis intervention requested by the family.

# Adult residential services clients and funding by region for FY 04\*:



\*Figures do not include any children served by DDD. They do include nursing home beds for clients with DD paid for by Long-Term Care.

Various regions of the state have a different mix of residential settings.



Various regions of the state have a different mix of residential settings.

### Adult Clients Only\* (FY 04)

Region	Comp. Homes	Group Homes	Comm. ICF/MR	RHC	Supp. Living	SOLA	AFH	Nursing Homes **	ARC	TOTAL
1	1	58	0	248	494	24	287	56	81	1,249
2	1	17	0	106	398	24	71	60	3	630
3	3	34	0	0	527	0	221	47	45	877
4	8	121	44	243	909	50	394	138	6	1,913
5	2	80	14	436	536	15	241	103	75	1,502
6	9	82	0	0	597	0	181	68	31	968
TOTAL	24	392	58	1,033	3,411	113	1,395	472	241	7,139

\*328 children (<22) are also served within DDD's residential services budget.

\*\*Nursing home beds shown are within the Long-Term Care budget.